

## APPLICATION DATA SHEET

### Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?::

Number of Copies of CRF::

Title:: PESTICIDAL 5-SUBSTITUTED-  
OXYALKYLAMINO-1-ARYLPYRAZOLE  
DERIVATIVES

Attorney Docket Number:: 1034477-000016

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: United States

Status:: Full Capacity

Given Name:: David

Middle Name:: Teh-Wei

Family Name:: CHOU

Name Suffix::

City of Residence:: Bad Soden

State or Province of Residence::

Country of Residence:: Germany

Street of Mailing Address:: Joseph-Haydn-Strasse 18

City of Mailing Address:: Bad Soden

State or Province of Mailing  
Address::

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing Address:: 65812

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Stefan

Middle Name::

Family Name:: SCHNATTERER

Name Suffix::

City of Residence:: Hattersheim

State or Province of Residence::

Country of Residence:: Germany

Street of Mailing Address:: Schillerring 10

City of Mailing Address:: Hattersheim

State or Province of Mailing Address::

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing Address:: 65795

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Werner  
Middle Name::  
Family Name:: KNAUF  
Name Suffix::  
City of Residence:: Erlangen  
State or Province of Residence::  
Country of Residence:: Germany  
Street of Mailing Address:: Spitzwegstrasse 6  
City of Mailing Address:: Erlangen  
State or Province of Mailing Address::  
Country of Mailing Address:: Germany  
Postal or Zip Code of Mailing Address:: 91056

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Germany  
Status:: Full Capacity  
Given Name:: Karl  
Middle Name::  
Family Name:: SEEGER  
Name Suffix::  
City of Residence:: Hofheim  
State or Province of Residence::

Country of Residence:: Germany  
Street of Mailing Address:: Schwalbenweg 9  
City of Mailing Address:: Hofheim  
State or Province of Mailing Address::  
Country of Mailing Address:: Germany  
Postal or Zip Code of Mailing Address:: 65719

### **Correspondence Information**

Correspondence Customer Number:: 21839  
Phone Number:: (703) 836-6620  
Fax Number: (703) 836-2021

### **Representative Information**

Representative Customer Number:: 21839

### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application:: Parent Filing Date::</b>
This Application	National Stage of	PCT/EP2004/009378 08/21/04

### **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
EP	03019618.2	09/04/03	Yes

### **Assignee Information**

<b>Assignee Name::</b>	Bayer CropScience S.A.
<b>Street of Mailing Address::</b>	55, avenue René Cassin
<b>City of Mailing Address::</b>	Lyon
<b>State or Province of Mailing Address::</b>	
<b>Country of Mailing Address::</b>	FRANCE
<b>Postal or Zip Code of Mailing Address::</b>	F-69009